## HR 847 " James Zadroga 9/11 Health and Compensation Act of 2009"

Summary of Testimony- Dr. Jacqueline Moline, M.D., MSc.

The regional consortium of World Trade Center Clinical Centers of Excellence in the New York and New Jersey area, coordinated by Mount Sinai School of Medicine, and supported by NIOSH, has provided 46,858 monitoring examinations to 26,651 WTC responders in all 50 states. Since the launch of the program in 2002, we have provided nearly 90,000 physical health, mental health, and social work services consortium-wide<sup>1</sup>. At Mount Sinai alone, we have provided 65,548 services; 38,475 of these have been provided since federal funding for treatment began in the fall of 2006. We provide this wide range of services regardless of patients' ability to pay.

Multiple 9/11-related medical problems have been diagnosed among responders enrolled in the monitoring component of the Program.

- Respiratory conditions, including both upper and lower respiratory diseases, remain prominent.
- New or worsened upper respiratory symptoms were experienced by 63% of program participants;
- New or worsened lower respiratory symptoms were experienced by 47% of participants, conditions such as asthma, RADS and COPD;
- Over one-quarter of responders had abnormal pulmonary function test results.

Many medical problems persist nearly 7.5 years after the attack in a substantial proportion of the 9/11 responders who receive care in our treatment component of the program.

- Gastrointestinal conditions affect 53% most are cases of GERD or gastro-esophageal reflux disorder.
- 35% are affected by mental health problems including PTSD and major depression.
- While lower respiratory conditions affect 46% of patients and upper respiratory conditions affect 69%.
- Social disability is common, with over 22% of responders being unemployed/laid off, or on sick leave/disability during the observation period.
- 21% have had no medical insurance at some point during the period.
- 64% suffer from multiple WTC-related health conditions.

The high prevalence and persistence of WTC-related medical problems in 9/11 responders underscore the critical importance and the urgent need for stable, predictable, multi-year federal support for a medical program for these responders. The complexity of the responders' health problems and the difficulty of their treatments provide the most compelling argument for providing their medical care in Centers of Excellence led by experienced physicians with specialty training in Occupational Medicine, and experience in treating thousands with WTC-related conditions. These Centers have the unique ability to monitor trends and emerging patters of disease, provide quality assurance, and to assess treatment efficacy.

The long term consequences of exposures at the WTC are not known. We must continue to monitor the health of the responders. Passage of HR 847 will ensure that the heroes of 9/11 are never forgotten.

<sup>&</sup>lt;sup>1</sup> Most of the clinical centers began treatment programs for WTC responders with philanthropic funding. The first such program was initiated at MSSM in January 2003.